

PLAINTIFF <b>UNITED STATES OF AMERICA</b>		COURT CASE NUMBER <b>CA No. 04-10642-RWZ</b>
DEFENDANT <b>928 Oakley Street, New Bedford, Massachusetts</b>		TYPE OF PROCESS <b>Complaint and Warrant and Monition</b>
<b>SERVE</b> → <b>AT</b>	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN  Compass Bank, Attn: Louis Steiblin	
	ADDRESS (Street or RFD, Apartment No., City, State, and ZIP Code)  One Compass Place, New Bedford, MA 02740	

SEND NOTICE OF SERVICE TO REQUESTER AT NAME AND ADDRESS BELOW:

Shelby D. Wright, Assistant U.S. Attorney  
 United States Attorney's Office  
 John Joseph Moakley United States Courthouse  
 1 Courthouse Way, Suite 9200  
 Boston, MA 02210

Number of process to be served with this Form - 285

Number of parties to be served in this case

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Address, All Telephone Numbers, and Estimated Times Available For Service)

Please serve the attached Verified Complaint and Warrant & Monition upon the above-referenced individual by certified mail, return receipt requested.

KBW x3364

Signature of Attorney or other Originator requesting service on behalf of :  Shelby D. Wright/JJT		<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER (617) 748-3100	DATE May 7, 2004
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**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. <small>(Sign only first USM 285 if more than one USM 285 is submitted)</small>	Total Process No. _____	District of Origin No. 38	District to Serve No. 38	Signature of Authorized USMS Deputy or Clerk  May 7, 2004	Date 5/17/04
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I hereby certify and return that I  have personally served,  have legal evidence of service,  have executed as shown in "Remarks", the process described on the individual, company, corporation, etc. at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below).

Name and title of individual served (If not shown above).	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.
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Address (complete only if different than shown above)	Date of Service 5/21/04	Time am pm
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Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount Owed to US Marshal or  May 7, 2004	Amount or Refund
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REMARKS: 5/17/04 Certify # 7003 0510 0004 3543 7395  
 5/18/04 ~~Re~~ Delivery Date (4)

PRIOR EDITIONS MAY BE USED

**1. CLERK OF THE COURT**

FORM USM 285 (Rev. 12/15/80)

USMS RECORD

NOTICE OF SERVICE

BILLING STATEMENT

ACKNOWLEDGMENT OF RECEIPT